

Iowa Council on Homelessness

Conflict of Interest Disclosure Statement

Updated October 29, 2015, by the Iowa Council on Homelessness Executive Committee

Iowa Council on Homelessness Policies regarding Conflict of Interest:

- **From the Iowa Council on Homelessness Governance Charter, 10/29/2015**
Conflict of Interest: Any individual participating in or influencing decision making must identify actual or perceived conflicts of interest as they arise and comply with the letter and spirit of this policy. Disclosure should occur at the earliest possible time and if possible, prior to the discussion of any such issue. Individuals with a conflict of interest should abstain from voting on any issue in which they may have a conflict.
An individual with a conflict of interest, who is the committee chair, shall yield that position during discussion and abstain from voting on the item.
Completed disclosure statements will be submitted by each council member at the commencement of their term and at any time afterwards when there are changes to the member's actual or perceived conflicts of interest.
Members should not participate until the statement has been submitted to the Iowa Council.
The Iowa Council will also strictly adhere to the conflict of interest regulatory requirements of the Federal Continuum of Care Program – 24 CFR 578.95.
- **Continuum of Care Program Interim Rule, 24 CFR 578.95**
Conflicts of Interest *[selected excerpt]:* "... (b) Continuum of Care board members. No Continuum of Care board member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents...."
- **Iowa Gubernatorial Appointee Handbook**
Conflict of Interest: Iowa Code § 68B.2 – The code lists a number of scenarios which are prohibited while holding a board or commission position. No member may use his or her position to give an advantage to a family member, friend, or any other member of the public. Also, a member, or his or her family, cannot receive money or the promise of another benefit for the performance of an act that occurs within the confines

Please acknowledge the applicable statements below:

	I have read and understand the Iowa Council on Homelessness policies regarding Conflict of Interest, as described above. I agree to abide by these policies.
	I will be responsible for completing and submitting the Conflict of Interest Disclosure Statement at the beginning of my term, and at any time afterwards when there are changes.
	I do NOT have any known actual or perceived Conflicts of Interest with regard to activities of the Iowa Council on Homelessness.
	I have the following known actual or perceived Conflicts of Interest with regard to activities of the Iowa Council on Homelessness: 1. _____ 2. _____ 3. _____ (Attach additional sheet if necessary)

Print Name

Sign Name

Date

Email, mail, or fax to:

Josh McRoberts
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